	Application				09/687,892	
TRANSMITTAL FORM		Filing Date		T	October 13, 2000	
		First Named	Named Inventor		Hsu	
		Group Art l	Jnit	1	3693	
		Examiner N	Examiner Name		Sara M. Chandler	
		Attorney Do	ocket No.	+	74622-014	
		Patent No.		1	Not applicable	
		Issue Date		1	Not applicable	
ENCLOSURES (check all that apply)						
ee Transmittal Form				П	Request for Certificate of	
				-	Correction	
Check Attached Copy of Fee Transmittal Form		Replacement I	Orawing(s)		Certificate of Correction	
Amendment/Response					Notice of Appeal to Board of Patent Appeals and Interferences	
Preliminary		Examination (I	RCE)		Appeal Brief (in triplicate)	
☐ After Final ☐ Affidavits/declaration(s) ☐ Letter to Official		Power of Atto	orney of Prior Powers)			
					• •	
Drantsperson including Drawings					Return Receipt Postcard	
[Total Sheets]	Terminal Disclaimer			Additional Enclosure(s) (please identify below)		
Petition for Extension of Time		Executed Declaration and Power of Attorney for Utility or Design Patent Application			(piease identify below)	
Information DisclosureStatement		Small Entity Statement				
Form PTO-1449 Copies of IDS Citations	CD(s) for large table or computer program					
Certified Copy of Priority Document(s)		Amendment After Allowance				
Sequence Listing submission						
Statement verifying						
identity of above						
CORRESPONDENCE ADDRESS			SIGNATURE BLOCK			
Direct all correspondence to:  Patent Administrator Proskauer Rose LLP One International Place Boston, MA 02110-2600 Tel. No.: (617) 526-9600 Fax No.: (617) 526-9899			Respectfully submitted,  Date: February 19, 2008  Reg. No.: 51,729  Tel. No.: (617) 526-9655  Fax No.: (617) 526-9899  Attorney for the Applicants  Proskauer Rose LLP  One International Place  Boston, MA 02110-2600			
	FORM    Check Attached   Copy of Fee   Transmittal Form   Amendment/Response   Preliminary   After Final   Affidavits/declaration(s)   Letter to Official   Draftsperson   including Drawings   Total Sheets   Petition for Extension of Time      Information Disclosure   Statement   Form PTO-1449   Copies of IDS   Citations      Certified Copy of Priority   Document(s)      Sequence Listing submission   Paper Copy/CD   Computer Readable Copy   Statement verifying   identity of above      ESPONDENCE ADDRESS   all correspondence to: Patent Add Proskauer One Interresposton, M   Tel. No.: (	EN Transmittal Form  Check Attached Copy of Fee Transmittal Form  Amendment/Response  Preliminary After Final Affidavits/declaration(s) Letter to Official Draftsperson including Drawings [Total Sheets]  Petition for Extension of Time  Information Disclosure Statement Form PTO-1449 Copies of IDS Citations  Certified Copy of Priority Document(s)  Sequence Listing submission Paper Copy/CD Computer Readable Copy Statement verifying identity of above  ESPONDENCE ADDRESS  all correspondence to: Patent Administrator Proskauer Rose LLP One International Pl Boston, MA 02110- Tel. No.: (617) 526-	TRANSMITTAL Filing Date First Name Group Art U Examiner N Attorney Do Patent No. Issue Date  ENCLOSURES ( Transmittal Form	TRANSMITTAL FORM    Filing Date	TRANSMITTAL FORM  Filing Date First Named Inventor  Group Art Unit  Examiner Name  Attorney Docket No.  Patent No.  Issue Date  ENCLOSURES (check all that apply)  ETansmittal Form  Copy of Notice to File Missing Parts of Application (PTO-1553)  Check Attached Copy of Fee Transmittal Form  Amendment/Response  Request For Continued Examination (RCE) Transmittal Affidavits/declaration(s) Letter to Official Draftsperson including Drawings [Total Sheets  Petition for Extension of Time  Petition for Extension of Time  Petition for Extension of Time  Porm PTO-1449 Copies of IDS Citations  Cretified Copy of Priority Document(s)  Sequence Listing submission Paper Copy/CD Computer Readable Copy Statement verifying identity of above  ESPONDENCE ADDRESS  all correspondence to: Patent Administrator Proskauer Rose LLP One International Place Boston, MA 02110-2600 Tel. No.: (617) 526-9600	